EXAMINER/PROCTOR APPLICATION

GED-007 (rev. 8/2002) Please duplicate form as needed

INSTRUCTIONS: *Please print or type.* Read the statements below and all referenced documents. Incomplete applications will be returned to the testing center. Mail completed application to: State GED Office; CA Department of Education; 1430 N Street, Suite 5408; Sacramento, CA 95814

PLEASE NOTE: All applicants will be contacted to ensure eligibility before applications are approved.

					STATE GED OFFICE USE ONLY						
CENTER ID NUMBER - REQUIRED FOR CURR				ENTERS	Examiner approved Mailec	STATE GED OFFI	Entered/Phoenix	Lí	Chief Exam	iner/Internet App.	
TESTING CENTER NAME					TESTING CENTER TELEPHONE						
ADDRESS					CITY			ZIP			
APPLICANT NAME				DAYTIME TELEPH			EPHONE	VE			
ADD POSI	TION - To ac	ld a testing cent	er staff perso	on, check either "Ch	ief Examiner, "Alternate l	Examiner" or "Pr	octor."				
CHIEF EXAMINER ©			ALTERNA	TE EXAMINER ©		PROCTOR ®					
DELETE POSITION - To remove a testing center staff person, type the name of the staff person to be removed in the space below. Please note that if a Chief Examiner is replaced, the outgoing Chief Examiner is automatically removed from the testing center staff. If the outgoing Chief Examiner should be retained as an Alternate Examiner, the incoming Chief Examiner must include a cover letter to this effect with this application. The letter must specify that the outgoing Chief Examiner's assignment at the testing agency has not changed.											
1.			2.								
EDUCATION ALL APPLICANTS MUST COMPLETE GED Chief Examiners and Alternate Chief Examiners must hold at least a bachelor's degree from an accredited college or university and must have experience in teaching, training, counseling, or testing. Applicants for the post of Alternate Chief Examiner who hold an associate's degree and have at least three years' experience in test administration may be eligible for an exception to this policy, with the written approval of the State GED Administrator and GEDTS. Proctors must have a high school diploma or equivalent.											
NAME OF SCHOOL			COURSE OF STUDY			DEGREE EAR	RNED	DATE COMPLETED			
CURRENT ASSIGNMENT/EXPERIENCE ALL APPLICANTS MUST COMPLETE											
FROM	ТО	DESCRIPTIO	ON OF DUTIES								
RESPONSIBILITIES AGREEMENT—CANDIDATE AND CHIEF EXAMINER MUST INITIAL EACH STATEMENT											
The candidate meets eligibility requirements as outlined in the GED Examiner's Manual.										ief Examiner	
The candidate is not involved in GED Instruction or ABE instruction.											
The candidate understands that only Chief & Alternate Examiners may administer tests or have access to testing materials.											
The candidate knows testing policies as presented in the GED Examiner's Manual, has been trained by an authorized examiner at the testing center (TRAINING DATE:											
The current Chief Examiner must review and sign the following statement. If the Chief Examiner is unable to sign this application, the ICAO must sign in the box below. CHIEF EXAMINER CERTIFICATION: I hereby acknowledge that I have					APPLICANT CERTIFICATION: I have read the "Responsibilities of GED Testing Centers in California: Criteria for Renewal and Approval," and the GED Examiner's Manual. I understand that I am to abide by all policies and procedures set forth in the						
fully trained the on the policies	ne applicant, ar	nd will continue t gulations set for	o do so on a	n ongoing basis,	documents listed above and that failure to do so metermination of the testing program.			may resul	ay result in immediate		
CHIEF EXAMINER OR ICAO SIGNAT			URE	DATE	APPLICANT SIGNA	TURE			DATI	E	